

**INFORMATION TECHNOLOGY
PURCHASE REQUEST**



Contact Information:

Your Name: _____
Department: _____
Room: _____
Phone: _____
Date: _____
Project: _____

Fill in contact information so that we know how to get in touch with you.

Office Use Only:

HelpDesk No: _____ Originated: _____
Received By: _____ Entered: _____
Pre-Pay: _____ Faxed: _____
Use Stock: _____ See HD: _____
Refill Stock: _____ Other: _____
Deliver: _____

Leave this box empty.

Financial Information:

Budget Codes	Max. Amount(s)
Hardware: _____	\$ _____
Software: _____	\$ _____
Other: _____	\$ _____
Authorizing Signature: _____	Date _____

**Authorizing signature is required to process all requests. (Principal/Director)*

Project / Misc. Information:

**Don't forget to include all necessary information for items not on the IT Standard Equipment List, including:
Vendor Information, Vendor Contacts, Item Descriptions, pricing, and shipping. Include additional pages as necessary.**

Qty.	Part No.	Description	Unit Price	Amount	T

Comments:

Subtotal: _____
Tax: _____ T
Shipping: _____
TOTAL: _____